CLAIMS ONLY .								Application Number   Filling Date								
					•	Applicant(s	<del>)</del> )									
									* May be used for additional claims or amendments							
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			*   *   *								
	Indep	Depend	Indep	Depend	Indep	Depend	1		Indep	Depend	Indep	Depend	Indep	Depend		
1							1	51				Ŀ				
2	<u> </u>	<del>  4</del>					į	52		<u>,                                     </u>						
3		10	-				ł	53 54				<del> </del>				
. 5		70				<u> </u>	ł	55				├	<del> </del>	<del></del>		
6		ו מו ו					1	56	·			†				
7		70					I	57								
8		\$					l	58		ļ			-			
10		<del>////</del>		<del> </del> -			ł	59 60				<i>- :</i>	<del></del>			
11							ł	61		<u> </u>			<del> </del>			
12		8					ĺ	62								
13							1	63								
14 15								64								
16	<del></del>	<del></del>						65 66								
17								67								
18								68				<del>                                     </del>		<u> </u>		
19								69								
20								70								
21								71 72								
23								73								
24								74								
25								75								
26							•	76			:					
27 28								77 78								
29								79								
30								- 80				<u> </u>				
31								.81								
32 33								82				,				
33								83 84				<u> </u>				
35								85				<del></del>				
36							5	86								
37								87								
38								88								
40								89 90								
41				-				91								
42								92								
43								93								
44								94								
45								95 96								
47					-			97								
48								98					.			
49								99				:				
50 Total	-,	<del></del>		-, -	——			100								
Indep								Total Indep	j							
Total Depend	134	<b>-</b>	4		4			Total Depend	4	-	4					
Total Claims	14							Total Claims								